# Case 19-31395 Doc 1 Filed 10/09/19 Entered 10/10/19 08:45:03 Desc Main Document Page 1 of 8

| ſ                                       | Fill in this information to identify the                            | case:  | IIS P         | FILED             | O<br>CY COURT          |               |                                   |
|---|---|--|---------------|-------------------|------------------------|---------------|-----------------------------------|
| United States Bankruptcy Court for the: |   |  | WEST          | ERN DISTE         | CY COURT<br>RICT OF NO |               |                                   |
|   | District of (s  |  |               |                   |                        |               |                                   |
| (                                       | (Sase number (If known):  | tate) Chapter  | <b>1</b> 9    | OCT -9            | P4:28                  |               | eck if this is an<br>ended filing |
|   |   |  | STEVE         | EN T. SAL         | ATA, CLERK             |               |                                   |
| _                                       | V('' : 1 E  |  | 0.4           | Ope               |                        |               |                                   |
| _                                       | Official Form 201   |  |               | 1                 |                        |               |                                   |
| V                                       | oluntary Petition   | n for Non-Individuals  | Filing        | for B             | ankrupt                | tcy           | 04/19                             |
| If                                      | more space is needed, attach a sep                                  | arate sheet to this form. On the top of any ad   | dditional pag | es, write the     | debtor's name          | and the ca    | ase                               |
| nı                                      | imber (it known). For more informa                                  | tion, a separate document, Instructions for  | вапкгиртсу ғ  | orms for No       | n-Individuals, is      | s available   |                                   |
|   | Debtor's name   | Person Contered Partnerships In  |               |                   |                        |               |                                   |
| ١.                                      | Debtor's flame  | Person Centered Partnerships, In   | J.            |                   |                        |               |                                   |
| 2.                                      | All other names debtor used in the last 8 years                     | Amara Wellness   |               |                   |                        |               |                                   |
|   | Include any assumed names, trade names, and doing business as names |  |               |                   |                        |               |                                   |
| 3.                                      | Debtor's federal Employer<br>Identification Number (EIN)            | 5_6227_1_8_8_9   |               |                   |                        |               |                                   |
| 4.                                      | Debtor's address  | Principal place of business  |               | failing addre     | ess, if different      | from princ    | ipal place                        |
|   |   | 5108 Reagan Drive  |               |                   |                        |               |                                   |
|   |   | Number Street  |               | lumber St         | reet                   |               |                                   |
|   |   | Suite 9  |               | PO Box 32         | 2301                   |               |                                   |
|   |   | Charlotte NC 28206   |               | O. Box            |                        |               |                                   |
|   |   | City State ZIP C   |               | Charlotte<br>lity | NC s                   | 282<br>tate 2 | 32<br>IP Code                     |
|   |   |  | ı             | ocation of p      | rincipal assets,       | if differen   | t from                            |
|   |   | Mecklenburg  |               |                   | e of business          |               |                                   |
|   |   | County   |               | NA                |                        |               |                                   |
|   |   |  | Λ             | lumber St         | reet                   |               |                                   |
|   |   |  | -             |                   |                        |               |                                   |
|   |   |  | ō             | iity              | S                      | tate Z        | ZIP Code                          |
| 5.                                      | Debtor's website (URL)  | www.amarawellness.org  |               |                   |                        |               |                                   |
| 6.                                      | Type of debtor  | ☐ Corporation (including Limited Liability Col ☐ Partnership (excluding LLP) ☐ Other. Specify: | mpany (LLC)   | and Limited L     | iability Partnersh     | nip (LLP))    |                                   |

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| Debtor | Person Centered F                                       | 'artnersni      | ps, Inc. Case number (if known)   |
|--------|---|-----------------|---|
|        | Namy  |                 |   |
| . De   | escribe debtor's business                               | A. Check        | cone:   |
|        |   | <b>□</b> Healtl | h Care Business (as defined in 11 U.S.C. § 101(27A))  |
|        |   | ☐ Single        | e Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  |
|        |   | ☐ Railro        | pad (as defined in 11 U.S.C. § 101(44))   |
|        |   |                 | broker (as defined in 11 U.S.C. § 101(53A))   |
|        |   |                 | modity Broker (as defined in 11 U.S.C. § 101(6))  |
|        |   | _               | ing Bank (as defined in 11 U.S.C. § 781(3))   |
|        |   |                 | of the above  |
|        |   |                 |   |
|        |   | B. Check        | k all that apply:   |
|        |   | □⁄тах-е         | exempt entity (as described in 26 U.S.C. § 501)   |
|        |   |                 | tment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C.   |
|        |   | § 80a           | 1-3)  |
|        |   | ☐ Inves         | tment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))  |
|        |   | http:/          | S (North American Industry Classification System) 4-digit code that best describes debtor. See //www.uscourts.gov/four-digit-national-association-naics-codes .   |
|        |   | 6 2             | 2_4   |
| . Ur   | nder which chapter of the                               | Check or        | ne:   |
|        | Bankruptcy Code is the debtor filing?                   | ☐ Chap          | ator 7  |
| de     |   | ☐ Chap          |   |
|        |   | •               | oter 11. Check all that apply:  |
|        |   | <b>→</b> Onap   | Debtor's aggregate noncontingent liquidated debts (excluding debts owed to  |
|        |   |                 | insiders or affiliates) are less than \$2,725,625 (amount subject to adjustment on 4/01/22 and every 3 years after that).   |
|        |   |                 | X The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the  |
|        |   |                 | debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).   |
|        |   |                 | A plan is being filed with this petition.   |
|        |   |                 | Acceptances of the plan were solicited prepetition from one or more classes of  |
|        |   |                 | creditors, in accordance with 11 U.S.C. § 1126(b).  |
|        |   |                 | □ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form. |
|        |   |                 | The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.   |
|        |   | ☐ Chap          |   |
|        | ere prior bankruptcy cases                              | X□ No           |   |
|        | filed by or against the debtor within the last 8 years? | ☐ Yes.          | District When Case number   |
|        | more than 2 cases, attach a                             |                 | MM / DD / YYYY  District When Case number   |
| se     | parate list.  |                 | District When Case number   |
| ın Δ*  | e any bankruptcy cases                                  | <b>ν</b> Π ••   |   |
|        | ending or being filed by a                              | X□ No           |   |
| bu     | isiness partner or an                                   | Yes.            | Debtor Relationship   |
| afi    | filiate of the debtor?                                  |                 | District When   |
|        | t all cases. If more than 1,                            |                 | MM / DD /YYYY   |
| att    | ach a separate list.                                    |                 | Case number, if known   |

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| De  | btor Person Centered P   | artnerships, Inc.  | Case number (if kno  | own)  |  |  |  |
|-----|--|--|--|---|--|--|--|
|     | Name   |  |  |   |  |  |  |
|     | 1441   | Objects all that another   |  |   |  |  |  |
| 11. | . Why is the case filed in <i>this</i> district?                                       | Check all that apply:  |  |   |  |  |  |
|     |  | XD Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days<br>immediately preceding the date of this petition or for a longer part of such 180 days than in any other<br>district. |  |   |  |  |  |
|     |  | ☐ A bankruptcy case conce  | eming debtor's affiliate, general partner  | , or partnership is pending in this district.                 |  |  |  |
|     | Describe debter community  | _  |  |   |  |  |  |
| 12. | Does the debtor own or have<br>possession of any real<br>property or personal property | ☐ Yes Answer below for ea  | ach property that needs immediate atte   | ention. Attach additional sheets if needed.                   |  |  |  |
|     | that needs immediate   |  | perty need immediate attention? (Ch  | eck all that apply.)  |  |  |  |
|     | attention?   | ☐ It poses or is all   | eged to pose a threat of imminent and  | identifiable hazard to public health or safety.               |  |  |  |
|     |  | What is the hazard?  |  |   |  |  |  |
|     |  | ☐ It needs to be p   | hysically secured or protected from the  | weather.  |  |  |  |
|     |  |  | hable goods or assets that could quick<br>ample, livestock, seasonal goods, mea<br>ontions)  |   |  |  |  |
|     |  |  |  |   |  |  |  |
|     |  | G Other  |  |   |  |  |  |
|     |  |  |  |   |  |  |  |
|     |  | Where is the prope   | Number Street  |   |  |  |  |
|     |  |  |  |   |  |  |  |
|     |  |  | City   | State ZIP Code  |  |  |  |
|     |  |  | City   | State ZIP Code  |  |  |  |
|     |  | Is the property ins  | ured?  |   |  |  |  |
|     |  | ☐ No   |  |   |  |  |  |
|     |  | Yes. Insurance a   | gency  |   |  |  |  |
|     |  | Contact nam  | ne   |   |  |  |  |
|     |  | Phone  |  |   |  |  |  |
|     |  |  |  |   |  |  |  |
|     |  |  | A CONTRACTOR OF THE CONTRACTOR |   |  |  |  |
|     | Statistical and admini   | strative information   |  |   |  |  |  |
| 13  | . Debtor's estimation of   | Check one:   |  |   |  |  |  |
|     | available funds  | ☐ Funds will be available for distribution to unsecured creditors.   |  |   |  |  |  |
|     |  | After any administrative   | expenses are paid, no funds will be ava  | ailable for distribution to unsecured creditors.              |  |  |  |
|     |  | <b>Д</b> 1-49  | 1,000-5,000  | 25,001-50,000   |  |  |  |
| 14  | Estimated number of creditors  | <u> </u>   | 5,001-10,000   | 50,001-100,000  |  |  |  |
|     |  | ☐ 100-199<br>☐ 200-999   | <b>1</b> 0,001-25,000  | ☐ More than 100,000   |  |  |  |
|     |  | <u></u> .  |  |   |  |  |  |
| 15  | . Estimated assets   | □ \$0-\$50,000<br>□ \$50,001-\$100,000   | □ \$1,000,001-\$10 million □ \$10,000,001-\$50 million   | ☐ \$500,000,001-\$1 billion<br>☐ \$1,000,000,001-\$10 billion |  |  |  |
|     |  | \$100,001-\$500,000  | \$50,000,001-\$100 million   | \$10,000,000,001-\$10 billion                                 |  |  |  |
|     |  | X□ \$500,001-\$1 million   | ■ \$100,000,001-\$500 million  | ☐ More than \$50 billion                                      |  |  |  |
|     |  |  |  |   |  |  |  |

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| Debtor       | Person Centered Pa                           | artnerships, Inc.  | Case number (if known)  |                             |  |  |
|--------------|--|--|---|-----------------------------|--|--|
| 16. Estimate | d liabilities                                | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | on 🗀                        | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |  |
| Re           | equest for Relief, Dec                       | laration, and Signature  | S   |                             |  |  |
| WARNING      |  |  | statement in connection with a ba<br>. 18 U.S.C. §§ 152, 1341, 1519,                                      |                             | an result in fines up to   |  |
|              | ion and signature of<br>ed representative of | ■ The debtor requests repetition.  | elief in accordance with the chapt  | ter of title 11, Uni        | led States Code, specified in this   |  |
|              |  | ■ I have been authorized   | d to file this petition on behalf of t  | he debtor.                  |  |  |
|              |  | I have examined the ir correct.  | nformation in this petition and hav   | ve a reasonable b           | pelief that the information is true and  |  |
|              |  | I declare under penalty of   | perjury that the foregoing is true  | and correct.                |  |  |
|              |  | Signature of authorized re   | presentative of debtor  | Erica Corbi<br>Printed name | in   |  |
| 18. Signatur | e of attorney                                | *  |   | Date                        |  |  |
|              |  | Signature of attorney for o  | debtor  | ММ                          | /DD /YYYY  |  |
|              |  | Printed name   |   |                             |  |  |
|              |  | Firm name  |   |                             |  |  |
|              |  | Number Street  |   |                             |  |  |
|              |  | City   |   | State                       | ZIP Code   |  |
|              |  | Contact phone  |   | Email address               |  |  |
|              |  | Bar number   |   | State                       | -  |  |

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Official Form 201A (12/15)

[If debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11 of the Bankruptcy Code, this Exhibit "A" shall be completed and attached to the petition.]

[Caption as in Form 416B]

### Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11

| a. Total assets  | •  |                     |
|--|----|---------------------|
| a. Total assets  |    |                     |
| b. Total debts (including debts listed in 2.c., below)                             | \$ |                     |
| c. Debt securities held by more than 500 holders                                   |    | <b>A</b>            |
|  |    | Approxima number of |
|  |    | holders:            |
| secured □ unsecured □ subordinated □ \$  |    |                     |
| secured $\square$ unsecured $\square$ subordinated $\square$ \$                    |    |                     |
| secured  unsecured  subordinated  \$   |    |                     |
| secured □ unsecured □ subordinated □ \$<br>secured □ unsecured □ subordinated □ \$ |    | <del></del>         |
|  |    |                     |
| d. Number of shares of preferred stock   |    |                     |
| e. Number of shares common stock   |    |                     |
| Comments, if any:  |    |                     |
|  |    |                     |
|  |    |                     |
| 3. Brief description of debtor's business:   |    |                     |
|  |    | -                   |
|  |    |                     |

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| Fill in this information to identify the case: |                    |
|--|--------------------|
| Debtor name                                    |                    |
| United States Bankruptcy Court for the:        | District of(State) |
| Case number (If known):                        |                    |

### Official Form 204

# Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

|   | Name of creditor and complete mailing address, including zip code                                    | Name, telephone number, and email address of creditor contact | Nature of the claim<br>(for example, trade<br>debts, bank loans,<br>professional<br>services, and<br>government<br>contracts) | Indicate if<br>claim is<br>contingent,<br>unliquidated,<br>or disputed | Amount of unsecured claim  If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. |  |                 |  |
|---|--|---|---|--|--|--|-----------------|--|
|   |  |   |   |  | Total claim, if partially secured  | Deduction for<br>value of<br>collateral or<br>setoff | Unsecured claim |  |
| 1 | Accu Reference Medical Lab<br>1901 E Linden Ave<br>Suite 4<br>Linden, NJ 07036-1195                  | 877.733.4522  | Professional<br>Services  |  |  |  | 17908.75        |  |
| 2 | BB&T<br>PO Box 580003<br>Charlotte, NC 28258-0003  | 800.528.4920  | Bank Loans  |  |  |  | 103,000         |  |
| 3 | BANK OF AMERICA - CREDIT CARD<br>VISA CLASSIC F<br>*3256   | Phone Number<br>800 555 1212                                  | Credit Card   | Contingent   |  |  | 7000            |  |
| 4 | CAN Capital Asset Servicing, LLC<br>2015 Vaughn Road<br>Bldg 500<br>Kennesaw, GA 30144               | 877.550.4731  | Bank Loan   |  |  |  | 171193.22       |  |
| 5 | Mecklenburg County<br>600 East Fourth Street 11th floor<br>Finance Department<br>Charlotte, NC 28202 | Finance Help Desk<br>980-314-2991                             | Judgement   |  |  |  | 528987.98       |  |
| 6 | IRS<br>PO Box 804522<br>Cincinnati, OH 45280-4522  | 800.829.3903  | Taxes   |  |  |  | 188458.54       |  |
| 7 | Gordon & Rees, LLP<br>1111 Broadway, Suite 1700<br>Oakland, CA 94607                                 | snahal@grsm.com   | Legal Services  |  |  |  | 15953.5         |  |
| 8 | Navitas Leasing Corp<br>814 Highway A1A North<br>Suite 205<br>Ponte Vedra Beach, FL 32082            | 866.956.2848  | Furniture Lease   |  |  |  | 10188.92        |  |

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Person Centered Partnerships, Inc.

Debtor

Case number (if known)

| Name of creditor and complete mailing address, including zip code |  | Name, telephone number, and email address of creditor contact | Nature of the claim<br>(for example, trade<br>debts, bank loans,<br>professional<br>services, and<br>government<br>contracts) | Indicate if<br>claim is<br>contingent,<br>unliquidated,<br>or disputed | Amount of unsecured claim  If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. |   |                    |  |
|---|--|---|---|--|--|---|--------------------|--|
|   |  |   |   |  | Total claim, if partially secured  | Deduction for value of collateral or setoff | Unsecured<br>claim |  |
| 9   | Iron Mountain Records Management<br>P.O. Box 27128<br>New York, NY 10087-7128      | (800) 934-3453  | Professional<br>Services  |  |  |   | 6199.15            |  |
| 10  | Everest Business Funding<br>5 West 37th Street<br>Suite 1100<br>New York, NY 10018 | (800) 619-2943  | Loan  |  |  |   | 86400              |  |
| 11  | Clarence G Grier, CPA<br>3207 Stonypointe Drive<br>Greensobor, NC 27406-5421       |   | Professional<br>Services  |  |  |   | 5500               |  |
| 12  | CFG Merchant Solutions<br>180 Maiden Lane<br>15th Floor<br>New York, NY 10038      | agv@cfgms.com   | Loan  |  |  |   | 29400              |  |
| 13  | Credibly<br>4026 N. Miller Road, Suite B200<br>Scottsdale, AZ 85251                | 888.664.1444  | Loan  |  |  |   | 81444              |  |
| 14  |  |   |   |  |  |   |                    |  |
| 15  |  |   |   |  |  |   |                    |  |
| 16  |  |   |   |  |  |   |                    |  |
| 17  |  |   |   |  |  |   |                    |  |
| 18  |  |   |   |  |  |   |                    |  |
| 19  |  |   |   |  |  |   |                    |  |
| 20  |  |   |   |  |  |   |                    |  |

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| Debtor Name Person Centered Partnersups, Income Dis | 1.  |        |         |        | - 7  |
|---|-----|--------|---------|--------|------|
| United States Bankruptcy Court for the: Dis         | 1/4 | n C    | abo     | · Am   | wa W |
|   |     | Distri | ct of _ |        |      |
|   |     |        | (S      | itate) |      |

### Official Form 202

### Declaration Under Penalty of Perjury for Non-Individual Debtors

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An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.



#### Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

| Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)   |
|--|
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)   |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)   |
| Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)  |
| Schedule H: Codebtors (Official Form 206H)   |
| Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)   |
| Amended Schedule   |
| Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)                                   |
| Other document that requires a declaration   |
| clare under penalty of perjury that the foregoing is true and correct.  Suited on MM / DD / YYYYY  Signature of individual signing on behalf of debtor  Erica Corbin |
| Printed name   |

Chief Executive Officer

Position or relationship to debtor